

CLAIMS ONLY

09/894857

Applicant(s)

* May be used for additional claims or amendments

| CLAIMS | AS FILED | | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | |
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| Total Indep | | | | | 6 | |
| Total Depend | | | | | 37 | |
| Total Claims | | | | | 43 | |